Religious Exemption Process

EXHIBIT A











Request Religious Exemption

- Parent/guardian access Religious Exemption Request Form www.msdh.ms.gov
- Completes Form
- Schedules Appointment at Local Health Department

Health Department Appointment

- Brings or completes Religious Exemption Form at Health Department
- Parent views vaccine education video
- Nurse counsels parent/guardian on benefits and risk of immunizations
- Nurse signs Request and sends to Office of Immunizations

Office of Immunizations

- Reviews request for completeness
- Prepares
 Medical/Religious
 Exemption Certificate
 and packet.
- Presents religious exemption to State Epidemiologist for acceptance

State Epidemiologist

 Reviews and accepts completed religious exemption request with signature of Certificate of Medical/Religious Exemption

Process Completion

- Exemption is recorded in MIIX
- Certificate of Medical/Religious Exemption to school and parent/guardian

Mississippi State Department of Health IMMUNIZATION MANUAL M-201		TOPIC: Laws Regulations Requirements
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7.1 MS School Immunization Laws

MS School Entry Requirements

In order to enroll in any public or private kindergarten, elementary, or secondary school in Mississippi, a student must provide the school with a:

Certificate of Immunization Compliance (Form 121) – <u>MUST</u> be signed by the Regional <u>Health Officer</u>, a physician, nurse or MIIX validated.

or a

Certificate of Medical/Religious Exemption (Form 122) - <u>is not computer generated</u>. This form MUST be signed by the State Epidemiologist or Deputy State Epidemiologist (refer to the Medical and/or Religious Exemption sections for specific information.)

The list of required immunizations is specified by the State Health Officer and is promulgated at least annually as directed by state statute. All vaccines are to be given at the appropriate age and intervals according to ACIP recommendations.

The MS Immunization Requirement and Schedules can be found on the MSDH website: at https://msdh.ms.gov/msdhsite/_static/resources/2029.pdf

7.2 Immunization Requirements for Out-of-State Students All out-of-state students and foreign students attending childcare or K-12 school (public or private) in Mississippi must adhere to the following immunization requirements.

• Students are required to be age appropriately immunized with all required vaccines per Mississippi School Immunization Law and Child Care requirements. All appropriate immunizations must be documented on the Form 121 or Medical or Religious Exemptions as documented on Form 122 and be presented upon admission.

For example: a child entering the 8th grade will be required to meet all kindergarten and 7th grade entry requirements.

The standard immunization schedule is available at all health department clinics and the catch- up schedule for those children who are not current is available in the Epidemiology and Prevention of Vaccine-Preventable Diseases - ("Pink Book").



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7.3 Medical Exemptions

General Instructions

To request a medical exemption from one or more required vaccinations, the MSDH Medical Exemption Request (Form 139-M) must be completed and signed by the child's physician (pediatrician, family practitioner, or internist) who is duly licensed in Mississippi. Children receiving specialized or tertiary care outside of the state may have medical exemption requests completed and signed by their out of state tertiary or specialty care physician, as indicated

All medical exemption requests submitted by a child's Mississippi licensed primary care physician (pediatrician, family practitioner, in state tertiary care specialist or internist) that are fully complete, including indication of the medical reason and designation of the exempted vaccines, and signed by the child's physician **will be accepted** by MSDH. Medical exemption requests completed and signed by an out of state tertiary care physician will be reviewed individually.

All medical exemption requests are submitted to the MSDH Office of Immunizations by the provider, reviewed for completeness, and signed by the State Epidemiologist or Deputy State Epidemiologist.

Once the medical exemption request is signed by the State Epidemiologist or Deputy State Epidemiologist, a Certificate of Medical/Religious Exemption (Form 122) will be issued. Only the Certificate of Medical/Religious Exemption (Form 122) signed and dated by the State Epidemiologist or Deputy State Epidemiologist provides official, documented proof that a child has been issued a medical exemption by MSDH. The original Certificate of Medical/Religious Exemption (Form 122) will be housed at MSDH with a copy mailed to the parent and the requesting physician.

Follow up and requests for additional information will be conducted by the State Epidemiologist or Deputy State Epidemiologist for out-of-state medical exemption requests if needed. The parent and the requesting physician will be contacted in the event that the out-of-state medical exemption request is not accepted.



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Requesting a Medical Exemption

Any requested medical exemption will be accepted if it meets the following criteria.

- The MSDH <u>Medical Exemption Request</u> (Form 139-M) must be completed and signed by the child's physician (pediatrician, family practitioner, in state tertiary care specialist or internist) who is duly licensed in Mississippi.
 - Medical exemption requests completed and signed by an out of state tertiary care physician will be reviewed individually.
- The same requesting physician (pediatrician, family practitioner, internist, or tertiary care physician) must indicate on Form 139-M the medical condition of the child seeking exemption and indicate the exemption status for each of the listed vaccines.
- Form 139-M must be submitted to the Mississippi State Department of Health, Office of Immunizations.
- The State Epidemiologist or Deputy State Epidemiologist will review, accept, and sign the completed medical exemption request and MSDH mail a copy of the Certificate of Medical/Religious Exemption (Form 122) to the parent and the pediatrician, family practitioner, internist, or tertiary care physician who submitted the Medical Exemption Request. The original Certificate of Medical/Religious Exemption (Form 122) will be housed at MSDH.
- Data regarding medical exemptions will be maintained on the MSDH website at
 Vaccine Exemptions Mississippi State Department of Health (ms.gov)

The exemption expiration date will be based on the circumstances for the exemption and will be no less than one school year unless otherwise indicated on the request.

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This policy will not amend the school law Section 41-23-37, Mississippi Code of 1972. Children with a Certificate of Medical/Religious Exemption who are not adequately immunized will be excluded from school if there is a threat of vaccine preventable diseases occurring in the community. The child will be excluded until the infectious disease is no longer present or is no longer a threat to the safety and welfare of the child or other children in the school.

Questions regarding the medical exemption process or the medical exemption request form should be directed to the Office of Immunizations (601) 576-7751.

The medical exemption request form should be sent to the Mississippi State Department of Health to the attention of the Office of Immunizations.

Mississippi State Department of Health

Office of Immunizations

570 E. Woodrow Wilson, O-420

Post Office Box 1700

Jackson, MS 39215-1700

Telephone: (601) 576-7725

Fax: (601) 576-7497

The State Epidemiologist or Deputy State Epidemiologist can also be reached at (601) 576-7725.



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7.4 Religious Exemptions

General Instructions

To request a religious exemption from one or more required vaccinations for Mississippi school entry, the parent or guardian must complete the MSDH Religious Exemption Request (Form 139-R) and submit to the County Health Department (appointment is required).

A review of all religious exemption requests for completeness will be conducted at the Mississippi State Department of Health. Complete Religious exemption requests submitted per MSDH policy will be accepted and signed by the State Epidemiologist or Deputy State Epidemiologist. Once the request is reviewed and accepted, a Certificate of Medical/Religious Exemption (Form 122) will be issued. Only the Certificate of Medical/Religious Exemption (Form 122) **signed and dated by the State Epidemiologist or Deputy State Epidemiologist** provides official, documented proof that a child has been issued a medical/religious exemption by MSDH. The original Certificate of Medical/Religious Exemption (Form 122) will be housed at MSDH with a copy mailed to the parent and the daycare or school indicated on the Religious Exemption Request Form.

Requesting a Religious Exemption

Any requested religious exemption will be accepted by MSDH, and a Certificate of Medical/Religious Exemption issued if following guidelines are met.

- The MSDH Religious Exemption Request (Form 139-R) must be completed signed and submitted to the County Health Department (appointment is required) by the child's parent or guardian.
- The parent/guardian will review the Vaccine Education video and will be given the opportunity to ask questions.
- The Public Health Nurse will discuss the benefits and risks of immunizations with the parent/guardian.
- The Public Health Nurse will inform the parent/guardian that if any vaccine-preventable diseases for which the child has not been adequately immunized are occurring in or threatening to occur in the



community, the child will, for the safety and benefit of him/herself and other children, be excluded from day care/school until the infectious disease is no longer present or is no longer a threat to the safety and welfare of the child or other children in the day care/school.

- The form 139-R must be submitted by the County Health Department to the Mississippi State Department of Health, Office of Immunizations through intraoffice mail.
- The State Epidemiologist or Deputy State Epidemiologist will accept and sign any Religious Exemption request that includes all the required components. MSDH will mail a copy of the signed Certificate of Medical/Religious Exemption (Form 122) to the parent and the daycare or school indicated on the Religious Exemption Request. The original Certificate of Medical/Religious Exemption (Form 122) will be housed at MSDH.

Data regarding medical/religious exemptions will be posted annually and will be maintained on the MSDH website at <u>Vaccine Exemptions - Mississippi State Department of Health (ms.gov)</u>.

This policy will not amend the school law Section 41-23-37, Mississippi Code of 1972. Children with a Certificate of Medical/Religious Exemption who are not adequately immunized will be excluded from school if there is a threat of vaccine preventable diseases occurring in the community. The child will be excluded until the infectious disease is no longer present or is no longer a threat to the safety and welfare of the child or other children in the school.

Questions regarding the religious exemption process or the religious exemption request form should be directed to the Office of Immunizations at (601) 576-7751.



Medical Exemption Request

INSTRUCTIONS

- The child's pediatrician, family physician, or internist licensed in Mississippi must complete and submit this form to the State Epidemiologist or Deputy State Epidemiologist. Forms completed by a child's out-of-state tertiary care physician will be reviewed on a case-by-case basis. See Vaccine Exemptions Mississippi State Department of Health (ms.gov) for additional details.
- Once the Medical Exemption is accepted and signed by the State Epidemiologist or Deputy State Epidemiologist, a copy is sent by mail to the physician and the parent at the addresses indicated below.

Date of Request:	Name of School/Child Care Facility:			City/County:			
Name of Child:				Date of Birth:			
	Last		First	MI			
Name of Parent: _					Phone Nun	nber:	
	Last		First	MI			
Address:							
	Street		City			State	Zip
Indicate the e	-	exemption sta	tus for each vac	e below (an exemp cine by checking the is required for eac	ne correct bo	-	
Vaccine	Permanent	Temporary (Include Date)	No Exemption	Vaccine	Permanent	Temporary (Include Date)	No Exemption
DTaP				MMR			
Hepatitis B				Pneumococcal			
Hib*				Tdap**			
IPV				**For 7 th grade			
Print name of chile	d's pediatriciar	ı, family physi	cian, or internist	licensed in Mississi	ppi (or out-of-	-state tertiary	care physician)
Address	Street		City			State	Zip
D 1 1 N 1			•		E M		•
Telephone Numbe	er				Fax Ni	ımber	
this child to be disability from I have discusse I have informed occurring in or from day care/s children in the Compartment of child (Or out-of-state in the compartment)	such that the vac the vaccine preved the benefits and define the parent/guar threatening to of school until the iday care/school. d's pediatrician tertiary care pla	ccination(s) spectentable disease. Id risks of immurdian that if any ccur in the communifications disease. In family physical physician	nizations with the process with the proc	for exemption from the would endanger their land parent/guardian as a conce diseases for which the fill, for the safety and be ent or is no longer a the enternal model.	life or health an ondition for exe he child has not benefit of him/h reat to the safet	d outweighs the mption. The been adequate erself and other y and welfare or	e risk of death or ly immunized are r children, be exclu of the child or other
Mississippi Medi	ical License Ni tertiary care pl	umber hysician)			N	NPI#:	

This document should be submitted to the State Epidemiologist or Deputy State Epidemiologist at MSDH in Jackson, Mississippi.

Mail to: MSDH Epidemiology Office, Post Office Box 1700, Jackson, Mississippi, 39215, or fax to (601) 576-7686

Religious Exemption Request

INSTRUCTIONS

- The child's parent or guardian must complete and sign the Religious Exemption Request Form indicating the vaccines for which the child will be exempted.
- Submit the completed form to the County Health Department (appointment is required). For information regarding County Health Department hours of operation go to www.msdh.ms.gov and to schedule an appointment call 855-767-0170.
- Additional steps will be completed at the County Health Department. For more about the process visit www.msdh.ms.gov.
- The completed Religious Exemption Request is submitted to the State Epidemiologist or Deputy State Epidemiologist for signature, and a

copy is sent by ma	il to the school and the	he parent/guardian at the ad	dresses in	ndicated below.			
Date of Request Name of School/Child Care Facility:		City and County:					
Name of Child	Child			Date of Birth:			
La	st	First	MI				
Name of Parent/Guard	ian:			Phone Numb	oer:		
	Last	First	MI				
Address:							
Stre	eet	City			State	Zip	
		tion status for each vaccin w (an exemption status is					
Vaccine	Permanent	No Exemption		Vaccine	Permanent	No Exemption	
DTaP				MMR			
Hepatitis B				Pneumococcal			
Hib*				Tdap**			
IPV				Varicella			
health of othe child or other • I understand to threatening to day care/school	r children; and that the children from the vac hat if any vaccine-pro- occur in the commun	ny child with the vaccination ne religious reasons for not vaccine preventable disease. eventable diseases for which nity, my child will, for the solution disease is no longer presentable.	vaccination h my chil safety and	ng my child outwe d has not been ade l benefit of him/he	eigh the risk of deat equately immunized rself and other chil	th or disability to my d are occurring in or dren, be excluded fror	
Parent/Guardian si	gnature:			Date			
Location of Count	y Health Department	:					
Verification of Proce	ess:						
Religious Exemption	on Request completed a	nd signed by parent/guardian.					
		ation video and has been given					
I have informed the occurring in or thre	e parent/guardian that if atening to occur in the ol until the infectious d	mmunizations with the parent/ any vaccine-preventable disea- community, the child will, for isease is no longer present or is	ases for wl the safety	hich the child has no and benefit of him/l	t been adequately important the transfer of th	dren, be excluded	

This document should be submitted through intraoffice mail to: Office of Immunizations MSDH Central Office in Jackson, Mississippi

Date:

Phone:

County of Health Department:

Signature of Health Department Nurse_____

Printed Name of Health Department Nurse_____

Certificate of Medical/Religious Exemption

Name of Student:				Birthdate	Birthdate:				
Name of Parent:									
Address:s	City	 State		Zip					
Medical Exemption hereby issued on the binternist.									
Religious Exemption hereby issued on the b		-				the above	e-named individual	is	
	Vaccines Exempted								
		DTaP	DT-Ped	Tdap	Td-Adult	IPV	Measles		
Permanently									
Temporarily Until:	Date								
Permanently	[Mumps	Rubella	Нер В	VAR	Hib	Pneumococcal		
	Date								
Physician/Health Provid	ler/HD: _								
Address:									
	Street			City	Sta	ate	Zip		
Telephone Number:									
Accepted by State Epide	emiologis	t or Deputy S	tate Epidemi	ologist:					
	Signat	ure				Date			

School Officials: *Do Not* File this form in cumulative folder. The form *must* be maintained in a separate file and reviewed periodically to ensure validity

This form may be used for Day Care or K -12 Exemptions.